PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax
(571)-273-2885

INSTRUCTIONS: This f appropriate. All further coindicated unless corrected maintenance fee notification	orrespondence includin I below or directed oth	o the Palent adva	nce or) specifying a new co	or m orresp	ondence address;	and/or	(b) indicating a sepa	rate	"FEE ADDRESS" for												
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.																
27683 7590 01/08/2009								_														
HAYNES AND BOONE, LLP IP Section 2323 Victory Avenue Suite 700 Dallas, TX 75219						Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. (Depositor's name) KUSTA MYICK (Depositor's name)																
																		Apri	il	1,2009		(Date)
												APPLICATION NO. FILING DATE				FIRST NAMED INVENTO		ATTORN		NEY DOCKET NO. CO		ONFIRMATION NO.
10/650,106	08/26/2003			Dennis M. Wiedeman			16356.828 (DC-01970A)		6423													
TITLE OF INVENTION:	SITE-TO-SITE DYNA	AMIC VIRTUAL I	LOCAI			Table 1	····															
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DU	E	PUBLICATION FEE D	UE	PREV. PAID ISSUI	FFEE	TOTAL FEE(S) DUE		DATE DUE												
nonprovisional	nonprovisional NO		\$1510		_	\$ 0		\$1810		04/08/2009												
EXAMINER		ART UNIT		CLASS-SUBCLASS																		
GREY, CHRISTOPHER P		2416		370-241000																		
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.																		
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Dell Products L.P. Round Rock, Texas																						
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 💆 Corporation or other private group entity 🖵 Government																						
4a. The following fee(s) are submitted: Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies				b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).																		
5. Change in Entity State	us (from status indicate SMALL ENTITY statu		7.	☐ b. Applicant is no	long	ger claiming SMAl	LL EN	ΓΙΤΥ status. See 37 C	FR 1	.27(g)(2).												
NOTE: The Issue Fee and interest as shown by the re	Publication Fee (if requestords of the Unit of Su	uired) will not be a	ccepte	from anyone other the Office.	nan th	ne applicant; a regi	stered : /	attorney or agent; or t	ne as	signee or other party in												
Authorized Signature _	u_	-	DateRegistration N	3 - 2 No26	26-09 0,528																	
This collection of informa an application. Confidenti submitting the completed this form and/or suggestic Box 1450, Alexandria, Virginia 2231 Under the Paperwork Red	ation is required by 37 C iality is governed by 35 application form to the ons for reducing this bu irginia 22313-1450. DC 13-1450.	U.S.C. 122 and 3 USPTO. Time winden, should be ser NOT SEND FEE	CFR ill vary nt to th SOR	depending upon the ie Chief Information COMPLETED FORM	indiv office	etain a benefit by t imated to take 12 i idual case. Any co r, U.S. Patent and D THIS ADDRESS	he publiminutes omment Traden S. SEN	lic which is to file (an is to complete, including is on the amount of the nark Office, U.S. Dep D TO: Commissioner	me y artm for F	ou require to complete ent of Commerce, P.O. Patents, P.O. Box 1450,												